| PATENT APPLICATE FEE DETERMINATION RECORD Application of Decket Number Effective December 8, 2004  |  |   |  |                                   |                  |                                      |   |                     |                        |         |                     |                        |
|--|--|---|--|-----------------------------------|------------------|--------------------------------------|---|---------------------|------------------------|---------|---------------------|------------------------|
| CLAIMS AS FILED - PART I (Cotumn 1) (Cotumn 2)   |  |   |  |                                   |                  | (Column 2)                           |   | SMALL EN            | TTY                    | OR      | OTHER<br>SMALL      |                        |
| U.S. NATIONAL STAGE FEES   |  |   |  |                                   |                  |                                      |   | RATE                | FEE                    | 7       | RATE                | FEE                    |
| BASIC FEE  |  |   | SMALL ENT. = 8 150   |                                   | LAR              | GE ENT. = 8 300                      |   | BASIC FEE           |                        | OR      | BASIC FEE           | 2                      |
| EXAMINATION FEE  |  |   | Satisfies PCT Article 33(1)-<br>(4) = \$ 50 / \$ 100                     |                                   | -                | ther situations =<br>\$ 100 / \$ 200 |   | EXAM FEE            |                        | 1       | EXAM FEE            | 1,10                   |
| SEARCH FEE   |  |   | U.S. Is ISA = \$ 50 / \$ 100<br>ALL other countries =<br>\$ 200 / \$ 400 |                                   |                  | Ohel'Sitietions =<br>5 250 / \$ 600  |   | SEARCH FEE          |                        | 1       | SEARCH FEE          |                        |
| FEE FOR EXTRA SPEC. PGS.   |  |   | minus 100 =  |                                   |                  | /50=                                 |   | X \$ 125 =          |                        | 1       | X \$ 250 =          |                        |
| TOTAL CHARGEABLE CLAIMS  |  |   | .5 minus 20 = .  |                                   |                  |                                      |   | X \$ 25 =           |                        | OR      | X \$ 50 =           |                        |
| INDEPENDENT CLAIMS   |  |   | ) m  | inus 3 =                          | •                |                                      |   | X \$ 100 =          |                        | OR      | X\$200=             |                        |
| MULTIPLE DEPENDENT CLAIM PRE   |  |   | SENT   |                                   |                  |                                      |   | +\$ 180 =           |                        | OR      | + \$ 360 =          |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2   |  |   |  |                                   |                  | •                                    | TOTAL                                   |                     | OR                     | TOTAL   |                     |                        |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)   |  |   |  |                                   |                  |                                      | OTHER THAN SMALL ENTITY OR SMALL ENTITY |                     |                        |         |                     |                        |
| AMENDMENT A  | 12/2/04  | CLADAS :<br>REMADIDIO<br>AFTER<br>AMENDMENT |  | HIGHI<br>NUME<br>PREVIO<br>PAID F | ER<br>USLY       | PRESENT<br>EXTRA                     |   | RATE                | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | • 5   | Minus  | · 2                               | 0                | •                                    |   | X \$ 25 =           |                        | OR      | X\$50=              | -1                     |
|  | Independent                                    | • /   | Minus  | •••                               | 3                | • )                                  | I                                       | X \$ 100 =          |                        | OR      | X \$ 200 =          | 77                     |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CL    |   |  | LAIM                              |                  |                                      | +\$ 180 =                               | 7 ·                 | OR                     | +\$360= | 7                   |                        |
|  |  |   |  |                                   |                  |                                      |   | TOTAL ADDIT.<br>FEE |                        | OR      | TOTAL ADDIT.<br>FEE |                        |
| (Column 1) (Column 2) (Column 3)   |  |   |  |                                   |                  |                                      |   |                     |                        |         |                     |                        |
| MONE   | blaglob  | CLAMS REMAINING AFTER AMENDMENT             |  | PREVIOUS PAID F                   | ST<br>ER<br>JSLY | PRESENT<br>EXTRA                     |   | RATE .              | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | • 73  | Minus  | · 51                              |                  | • /                                  | ſ                                       | X\$25=              |                        | OR      | X\$50=              | $\neg \neg$            |
|  | Independent                                    | • 7   | Minus  | ··· 2                             | 5                | -/                                   | ſ                                       | X \$ 100 =          |                        | OR      | X\$200=             | 7                      |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |  |                                   |                  |                                      | Ī                                       | +\$ 180 =           |                        | OR      | +\$380=             | 7 :                    |
|  |  |   |  |                                   |                  |                                      | 7                                       | FEE                 |                        | OR      | TOTAL ADOIT.<br>FEE |                        |
| * If the entry in column 1 is less than the entry in column 2, write "O" in column 3. ** If the Triphest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20". *** If the Triphest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3". |  |   |  |                                   |                  |                                      |   |                     |                        |         |                     |                        |